WHITE - DIVISION OF WATER RESOURCES
CANARY - CLIENT'S COPY
PINK - WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
Log No. 101213
Permit No.
Basin 076

NOTICE OF INTENT NO. 56600

1. OWNER T. W. Construction
MAILING ADDRESS 2050 Kleppe Lane
Sparks, NV 89431

ADDRESS AT WELL LOCATION Farm District Rd.
Fernley

2. LOCATION ____ 1/4 SE 1/4 Sec. 23 T 20N N/S R 25E E Lyon County
PERMIT NO. ____ Issued by Water Resources | 21-351-12 Parcel No. | Subdivision Name

3. **WORK PERFORMED**
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☒ Abandon ☐ Other ____

4. **PROPOSED USE**
☒ Domestic ☐ Irrigation ☐ Test
☐ Municipal/Industrial ☐ Monitor ☐ Stock

5. **WELL TYPE**
☐ Cable ☐ Rotary ☐ RVC
☐ Air ☐ Other ____

6. **LITHOLOGIC LOG**

Material	Water Strata	From	To	Thickness
On this date we abandoned a 8' x 89' well by perforating with a Mills Knife from 85' to 20'. We then poured neat cement mixed 5.2 gallons of water per sack. We then cut off the top of the well.				

Date started 12/2/2005 , 19__
Date completed 12/2/2005 , 19__

7. **WELL TEST DATA**

TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

8. **WELL CONSTRUCTION**
Depth Drilled 89 Feet Depth Cased 89 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
____ Inches	____ Feet	____ Feet
____ Inches	____ Feet	____ Feet
____ Inches	____ Feet	____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	16.94	.188	+2	89

Perforations:
Type perforation Mills Knife
Size perforation Puncture
From 85 feet to 20 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☐ Yes ☒ No
Depth of Seal ____
Placement Method: ☐ Pumped ☒ Poured
Seal Type: ☒ Neat Cement ☐ Cement Grout ☐ Concrete Grout
Gravel Packed: ☐ Yes ☒ No
From ____ feet to ____ feet

9. **WATER LEVEL**
Static water level 87 feet below land surface
Artesian flow ____ G.P.M. ____ P.S.I.
Water temperature ____ °F Quality ____

10. **DRILLER'S CERTIFICATION**
This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Bruce MacKay Pump & Well Service, Inc. (Contractor)
Address 1600 Mt. Rose Hwy (Contractor)
Reno, NV 89511
Nevada contractor's license number issued by the State Contractor's Board 23096
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2159
Signed R. Bruce MacKay
By driller performing actual drilling on-site or contractor
Date 12/5/2005

USE ADDITIONAL SHEETS IF NECESSARY

RECEIVED
2005 DEC 12 AM 10: 03
STATE ENGINEER'S OFFICE